False belief about etiology of cancer

Ali M. Al-Amri, MD

Department of Internal Medicine/Oncology, College of Medicine, University of Dammam, King Fahd Hospital of the University, Al-Khobar, Eastern Province, Kingdom of Saudi Arabia.
Correspondence to: Dr. Ali M. Al-Amri, MD, Department of Internal Medicine and Oncology, King Fahd Hospital of the University, Al-Khobar 31952, PO Box 40182, Saudi Arabia. Telephone 9663896741, E-mail: aliamri49@hotmail.com.

Abstract: To many, the etiology of cancer remains one of the mysterious myths among many of patients suffering of cancer in spite of the plenty of information available nowadays. Even though, many cancer patients can be treated and their diseases can be cured, they are still blaming others for the etiology of their suffering, specially their friends, family members or neighbors. In our area, many cancer patients continue to believe in false idea (al-ain) as a cause of their cancer. This believes can lead to cultivation of fears and affect the relation of cancer patients to their close relatives, friends and even can interfere with cancer management. It is important, therefore, to study this myth and explore if it has any role in relation to the etiology of cancer disease.
[Ali M. Al-Amri. **False belief about etiology of cancer.** *Life Sci J* 2012;9(3):2230-2232] (ISSN:1097-8135). http://www.lifesciencesite.com. 398

Keywords: al-ain, cancer, cause, exponential, patients

Introduction

The relationship between physical and psychological health is obscure. Currently, there is no evidence that stress, death of relatives, divorce and others adverse life events are a direct cause of cancer.[1-6]

There is no yet clinical evidence that alain can cause or contribute to cancer and to my knowledge this is the first study about al-ain as a cause of cancer. When patients are diagnosed with cancer, they are very often desperate to find any reason or explanation for their disease. Some of the patients believe alain is the causes of cancer. The patients said this is an effect of visual array which initiate cancer and lead to imminent death.

In this study, we evaluate if there is correlation of al-ain as described by the patients, with their malignant disease.

Patients and methods:

This study was carried out at King Fahd Hospital of the University at al-khobar. It is an open interview and questions with patients suffering of cancer. We interviewed only patients who mentioned al-ain as the cause of their cancer and patients who did not mention al-ain were not included in this study. This interview was accomplished in 2 days. In the first day, data about al-ain were collected and in the second day close review of the symptoms of the patients were carried out. The description of al-ain and information related to al-ain are reflective of the patients view. Devil person is the person who is able to use al-ain to cause immediate harm. Al-ain is the adverse outcome of talk or touch of devil person by mentioning the patient's good health, appetite or look. The talk or the touch of the devil person should be accompanied with surprise without faith of god.

Results:

A total of 42 patients were included in this study as shown in table1. These patients had different type of cancer. 22 (52.38%) patients were male and 20 (47.62%) were female. In all patients, prior to symptoms review, 100%, the symptoms of cancer were coincidental to al-ain. Ninety-five percent had at least tumor ≥ 3cm or metastatic disease at the time of al-ain. All of them they haired talk or touch with talk from the devil person mentioning their good health or nice look and immediately started to complain of symptoms as shown in table1. Twenty-seven (64.28%) of the devil persons were relative of the patients. These devil persons had history of breaking cars, glasses and causing harm to others but none of these events were witnessed by the patients themselves as shown in table2. Table3 show that 40 (95.24%) of the patients had many symptoms prior to al-ain time of at least 2 weeks. Only 2 (4.76%) had coincidental symptoms.

Discussion

Several cancer patients believed that cancer was caused by many factors such as family history, lifestyle and a trigger such as a virus or stress. In our area, cancer patients believed al-ain is a cuase in adition to what mentioned above.

Neoplasm arises from transformed cells by mult-step carcinogenesis. This process of pre-clinical satge include: initiation, promotion and conversion to malignant cells. The stage from preneoplasia to the

stage of conversion to malignant cells extend from months to years.[7] This length of time prior to suffering of cancer symptoms is the first important factor againist al-ain as a cuase of cancer in this study.

Exponential growth of converted malignant cells is cellular division with a constant dividing time. One cell divides into two and then four, etc., with each doubling taking the same time. This growth is easily recognizable when graphed. It is a straight line on a semi-log scale. [8, 9]

The number of cells is described by the equation 2^n where n is the number of doublings that have taken place. Tissue density is approximately a billion cells per cubic centimeter (cc). A billion is approximately 2^30. Ignoring the normal cells, a 1 cc tumor started as a single cancer cell that has divided 30 times to cause symptoms. Data show the time for a breast cancer to double in volume is 25 days to at least 1000 days with a typical value of about 100 days. Combining this information, we can estimate the usual preclinical time of breast cancer as 30 doublings at 100 day or a total of 8 years.[10] Table 1 indicate that all patients said that al-ain was affected them on the day they start to complain of symptoms. That mean the malignant cells have reached large size with long time prior to cause these symptoms. This paradox of exponential growth time of beginning of cancer and the timing of al-ain is the second important factor against al-ain as a cause of cancer.

The third important reason against al-ain as a cause of cancer that the old events of the devil persons were not witnessed or watched by the patients. The patients said they hair about these events only even though 40% of these devil persons were close relatives.

The fourth important factor against al-ain as a cause of cancer is the review of the symptoms of the patients. Table 3, shows that 95% of those patients actually had symptoms prior to the al-ain events time and only about 5%, the tow events were coincidental. All of the patients said that al-ain and the disease should be coincidental and occurs on the same time. However, close review of their symptoms show that it is not the case, rolling out what they belief (al-ain) is the cause of their cancer.

In summary, the pre-clinical stage or the multi-step carcinogenesis, the exponential growth of the transformed malignant cells, the un-witnessed previous events and the presence of symptoms prior to al-ain indicated that al-ain is a false belief as a cause of cancer in this study.

Table 1. Demographic of cancer patients

	Gender	Diagnosis	Time of symptoms	Time of ain	Average Size of mass	Description of how devil person affected them
6	M	Lymphoma	2 weeks	2 weeks	3x4cm	Patients heard verbal talk from someone and immediately start to complain of symptoms
2	M	AML	4 weeks	4 weeks	-	
20	F	Breast ca	4weeks	4weeks	3x2 cm with metastasis	
5	M	CML	1 weeks	1 weeks	Met	
2	M	Pancreatic	3 weeks	3 weeks	2x3 with liver met.	
7	M	Prostates ca	4 weeks	4 weeks	Hematuria	

Table 2: patient's description of the devil persons

patients	Devil person gender	Relations with patients	Type of old events done by devil person	Witnessed events
22	Male	12 with close relation	Break glass,	None
20	Female	15 with close relation	Break watch, Break cars and tires	None

Table 3: close review of the patients symptoms

Patients	Start of symptoms	Symptoms at the Time of alain
14	6 weeks -12 weeks prior to alain time: fatigue, loss of weight, feeling of not the right person, anorexia	Pain
26	2 weeks to 4 weeks prior to al-ain time: sleep disturbance, fever, anorexia, weight loss, stress and anxiety and hematuria	Pain or fever
2	pain at the same time and were normal prior to alain time	Pain

References

1. Priestman TJ, Priestman SG, Bradshaw C. Stress and breast cancer. Br J Cancer. 1985;51:493–498.
2. Kvikstad A, Vatten LJ, Tretli S, Kvinnsland S.Death of a husband or marital divorce related to risk of breast cancer in middle-aged women: a nested case–control study among Norwegian women born 1935–1954. *Eur J Cancer.* 1994;4:473–477.
3. Kvikstad A, Vatten LJ. Risk and prognosis of cancer in middle-aged women who experienced the death of a child. Int J Cancer. 1996;67:165–169.
4. Johansen C, Olsen JH. Psychological stress, cancer incidence and mortality from non-malignant diseases. Br J Cancer. 1997;75:144–148.
5. Chen CC, David AS, Nunnerly H, et al. Adverse life events and breast cancer: case–control study. BMJ. 1995;311:1527–1530.
6. Roberts FD, Newcomb PA, Trentham-Dietz A, Storer BE. Self-reported stress and risk of breast cancer. Cancer. 1996;77:1089–1093.
7. charles M Haskell. Introduction. In: cancer treatment5th ed. W.B Saunders company.2-8.
8. Courtney JG, Longnecker MP, Theorell T, de Verdier G. Stressful life events and the risk of colorectal cancer. Epidemiology. 1993;4:407–414.
9. Brown BW, Atkinson EN, Bartoszynski R, Thompson JR, Montague ED: Estimation of human tumour growth rate from distribution of tumour size at detection. J Natl Cancer Inst 1984, 72:31-38.
10. Norton L: A Gompertzian model of human breast cancer growth. Cancer Res. 1988**,** 48:7067-7071.

9/17/2012